

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F55447

FILED  
Mar 19, 2009  
Secretary of State

Entity Name: CHESTER WEBB & SONS AUTO PAINTING, INC.

## Current Principal Place of Business:

C/O CHESTER WEBB  
1010 N. NOVA ROAD  
DAYTONA BEACH, FL 32117 US

## New Principal Place of Business:

## Current Mailing Address:

RENEE DECATOR  
685 SANDERLING DRIVE  
INDIALANTIC, FL 32903 US

## New Mailing Address:

FEI Number: 59-2045794      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WEBB (CHESTER)  
825 COUNTY ROAD 325  
BUNNELL, FL 32110 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WEBB, CHESTER, SR.,  
Address: 825 COUNTY ROAD 325  
City-St-Zip: BUNNELL, FL 32110

Title: P ( ) Delete  
Name: WEBB (CHESTER), JR.,  
Address: 1010 N. NOVA RD.  
City-St-Zip: DAYTONA BEACH, FL 32117

Title: SVD ( ) Delete  
Name: DECATOR, RENEE  
Address: 685 SANDERLING DR  
City-St-Zip: INDIALANTIC, FL 32903

Title: AS ( ) Delete  
Name: BEESLEY, JOY,  
Address: 1010 NORTH NOVA ROAD  
City-St-Zip: DAYTONA BEACH, FL 32117

Title: VP ( ) Delete  
Name: WEBB, JERRY  
Address: 234 15TH ST  
City-St-Zip: HOLLY HILL, FL 32117

Title: AS ( ) Delete  
Name: WEBB, UDELL J.,  
Address: 325 COUNTY RD 325  
City-St-Zip: BUNNELL, FL 32110

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RENEE DECATOR

SVD

03/19/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date